

POSITION	ID NO.	DATE
CLASSIFIER	49	4/3/97
EXAMINER	720	6/3/97
TYPIST	EPI 920	6/13/1972 3-98
VERIFIER	11 720	6/3/97 X
CORPS CORR.		
SPEC. HAND	842	2-2-98
FILE MAINT.		
DRAFTING		

## INDEX OF CLAIMS

Claim	Date
Final	
1 Original	
1 2 ✓	
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1 48 ✓	
1 49 ✓	
1 50 ✓	

SYMBOLS

✓	Rejected
=	Allowed
- (Through number)	Cancelled
+	Restricted
N	Non-elected
I	Intermediate
A	Appeal
O	Objected

Claim	Date
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